

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Smc	71002	7/14/99
O.I.P.E. CLASSIFIER			7/20/99
FORMALITY REVIEW		64694	11-5-99

INDEX OF CLAIMS

.....	Rejected	N	Non-elected
.....	Allowed	I	Interference
(Through numeral).....	Canceled	A	Appeal
.....	Restricted	O	Objected

Claim	Date
1	1/7/94
2	1/7/94
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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